AFFIDAVIT OF SOCIAL SECURITY INELIGIBILITY Applicants with No Social Security Number

North Carolina	
Mecklenburg County	7

Register of Deeds

I,Print Name	, appearing before the undersign	ned notary and
being duly sworn, swear/affirm that I have not be	een issued a Social Security Numb	er by the
United States Government, and as of the date re	flected below, I am NOT currently	eligible to
obtain a Social Security number. I further state, t	hat I have not been assigned an ac	count number
by the Social Security Administration. I understa	and this information will be used to	o obtain a
Marriage License issued by the Mecklenburg Co	unty Register of Deeds Office.	
	Affiant Signature	
Sworn to (or affirmed) and subscribed before me this	day of	20
	Notary Public's Signature	
	Notary's Typed or Printed Name	
(SEAL)		
MY COMISSION EXPIRES		